



City of National City  
**Facility Use Application**

1243 National City Blvd  
National City, CA 91950  
(619)336-4580  
Fax (619)336-4594  
After hours dispatch:  
(619)336-4411

**TO ALL APPLICANTS:** It is strongly recommended that an applicant requesting use of City Facility attend the City Council meeting when the item is scheduled for consideration in order to answer any questions from the City Council.

Facility Requested: please circle

Martin Luther King Jr. Building  
North Room      South Room      Entire Facility

Date(s) of Use: \_\_\_\_\_ Day(s) of Use: \_\_\_\_\_

Time of Use: From: \_\_\_\_\_ AM/PM    To: \_\_\_\_\_ AM/PM – **INCLUDE SET-UP & CLEAN UP TIME**

Type of Function/Activity: \_\_\_\_\_ Is the event open to the public? \_\_\_\_\_

Name & Address of Organization/Group: \_\_\_\_\_

Non- profit organization: Yes      No      Tax ID # \_\_\_\_\_

Anticipated Maximum Attendance: \_\_\_\_\_ Percentage of National City Residents \_\_\_\_\_

Will Admission be charged? \_\_\_\_\_ Amount \$ \_\_\_\_\_ Will this be a Fund Raising Event? \_\_\_\_\_

Equipment Requested: \_\_\_\_\_ # of chairs \_\_\_\_\_ # of banquet tables \_\_\_\_\_ Stage

\_\_\_\_\_ Podium/Microphone

**\*\*PLEASE ATTACH SEATING DIAGRAM**

\_\_\_\_\_ Audio & Visual Equipment Required? (Please Specify)

Use of Kitchen: \_\_\_\_\_ Yes \_\_\_\_\_ No      Use of Gas for Range and Oven: \_\_\_\_\_ Yes \_\_\_\_\_ No

Is the Use of Alcohol Requested? \_\_\_\_\_

Will other paid services be used (I. e, commercial caterer, DJ, Band, etc)? \_\_\_\_\_ Yes \_\_\_\_\_ No

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

How many times in the last twelve months have you requested to use a City Facility? \_\_\_\_

It is expressly understood and agreed that the applicant assumes all risk for loss, damage, Liability, injury, cost or expense that may arise during or be caused in any way by such use or occupancy of the facilities of the City of National City and/or Community Services Department.

The applicant further agrees that in considerations of being permitted the use of the facilities agreed to, they will save and hold harmless the said City of National City, its officers, agents, employees and volunteers from any loss, claims, and liability damages, and/or injuries to persons and property that in any way may be caused by applicant's use or occupancy.

I, the undersigned, hereby certify to abide by the regulations governing said facility and agree to abide by all City of National City ordinances and facility rules and policies, and be representative of the user organizations. Further, I agree to be personally responsible for any damage/loss sustained by the ground, building, furniture or equipment or unusual clean up occurring through the occupancy of said facilities.

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Application recognizes and understands that use of the City's facility may create a possessory interest subject to property taxation and that applicant may be subject to the payment of property taxes levied on such interest. Applicant further agrees to pay any and all property taxes, if any assessed during the use of the City's facility pursuant to sections 107 and 107.6 of the revenue and taxation code against applicant's possessory interest in the City's facility.

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**I CERTIFY THAT I HAVE RECEIVED A COPY OF THE RULES AND REGULATIONS FOR THE FACILITY REQUESTED, AND I AGREE FOR MY ORGANIZATION/ GROUP TO CONFORM TO ALL OF ITS PROVISION.**

DATE COMPLETED: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

ADDRESS OF APPLICANT: \_\_\_\_\_

CITY, STATE, AND ZIP CODE: \_\_\_\_\_

PHONE: DAY \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

CONTACT PERSON ON THE DAY OF THE EVENT: \_\_\_\_\_

PHONE: (    ) \_\_\_\_\_ CELL: (    ) \_\_\_\_\_

**HAVE YOUR COPY OF  
APPLICATION IN  
POSSESSION DURING USE**

Please type or print clearly with a Ballpoint pen. Complete application must be submitted and payment submitted in advanced of the event.

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Rental Amount Received: _____	Public Works Staff Only- Receipt Number: _____
Deposit Amount: _____	Deposit/ Key Returned: _____
Check _____	Key issued: _____ YES _____ NO

**CITY OF NATIONAL CITY  
PUBLIC PROPERTY USE HOLD HARMLESS  
AND INDEMNIFICATION AGREEMENT**

Person requesting use of City property, facilities or personnel are required to provide a minimum of \$1,000,000 combined single limit insurance for bodily injury and property damage which include the city, its officials, agents and employees named as additional insured and to sign the hold harmless agreement. Certificate of Insurance must be attached to this permit.

Organization: \_\_\_\_\_

Person in charge of activity: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

City Facilities and/ or property requested: \_\_\_\_\_

Date(s) of use: \_\_\_\_\_

**HOLD HARMLESS AGREEMENT**

As a condition of the issuance of a temporary use permit to conduct its activities On public or private property, the undersigned hereby agree(s) to defend, indemnify and hold harmless the City of National City and its officers, employees and agents from and against any and all claims, demands, costs, losses, liability or damages for any personal injury, death, or property damage, or both, or any litigation and other liability, including attorneys fees and the costs of litigation, arising out or related to the use of public property or the activity taken under the permit by the permit or its agents, employees or contractors.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

Certificate of Insurance Approved by \_\_\_\_\_  
Name and Title

## Safety/ Security

Please describe your procedures for crowd control and internal security:

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper has a slight shadow on its right side, suggesting it's resting on a surface.

\_\_\_\_ YES \_\_\_\_NO Have you hired any Professional Security organization to handle Security arrangements for this event? If YES, please list:

Security Organization: \_\_\_\_\_

Security Organization Address:

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Security Director (Name): \_\_\_\_\_ Phone: \_\_\_\_\_

## Monitoring Alcohol Consumption

Please describe your producers for monitoring alcohol consumption:

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Organization must designate a person to ensure that alcohol is being served to persons 21 years of age or older. The designated alcohol server must also be 21 years of age or older.

Name: \_\_\_\_\_

Contact phone number the day of event: \_\_\_\_\_

\_\_\_\_ YES \_\_\_\_ NO Have you hired any Professional Security organization to handle Security arrangements for this event? If YES, please list:

Security Organization: \_\_\_\_\_

Security Organization Address:

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Security Director (Name): \_\_\_\_\_ Phone: \_\_\_\_\_

## SUMMARY OF CHARGES

### Fees and Costs:

Service Clubs: \$100/month

Other Organizations: see prices below

### **Martin Luther King Jr. Community Center**

<u>Activity</u>	<u>South Room</u>	<u>North Room</u>	<u>Entire Hall</u>
<u>Dining:</u>			
0-73	\$23.45/hr	-----	-----
0-149	-----	\$70.36/hr	-----
150-221	-----	\$87.95/hr	-----
222-294	-----	-----	\$117.26/hr
<u>Dance/ Assembly:</u>			
0-100	\$23.45/hr	-----	-----
101-157	\$29.32/hr	-----	-----
158-300	-----	\$70.36/hr	-----
301-472	-----	\$87.95/hr	-----
473-630	-----	-----	\$117.26/hr

### **Casa de Salud, El Toyon Recreation, Camacho Recreation & Kimball Recreation Center**

\$23.45/hr

\*Please note Camacho Gym falls under 801 Policy Fee

### **Kimball Senior Center**

0-149	\$70.36/hr
151-221	\$87.97/hr

Kitchen: \$10.00/hr

\$50.00 Minimum – (only to be used in conjunction with the use of the hall)

\$60.00 Kitchen Deposit – (required, can not be waived, and refundable upon approval from Public Works staff)

\$22.00/hr. during working hours and \$35.00/hr. for overtime hours

\_\_\_\_\_ hrs Total\$ \_\_\_\_\_

Custodial charge shall be charges for set up, clean up and duration of event based on the events' estimated attendance as follows:

1-100 person	1hr. set up and 1hr. clean up
101-157	2hr. set up and 2hr. clean up
158-300	3hr. set up and 3hr. clean up
301-472	4hr. set up and 4hr. clean up
473-630	5hr. set up and 5hr. clean up

**\*\*PLEASE NOTE: ADDITIONAL CHARGE FOR TABLES AND CHAIRS \$1.00 PER TABLE, \$.75 PER CHAIR\*\***

**Building use fee: \$50.00-required, non waivable and non-refundable  
INSURANCE WILL BE REQUIRED, FOR ALL RENTALS.**

## **APPLICATION INSTRUCTIONS**

Please complete and sign the application for Facility Use.

Submit a certificate of Liability Insurance in the amount of \$1,000,000 naming the “City Of National City” as Additional Insured.

If alcohol is sold or served, host liquor or liquor liability coverage with minimum limits of \$1,000,000 must be provided.

Please provide a letter addressed to the Director of Public Works, explaining the purpose of the event, date, time, number of anticipated participants, request for waiver of fees, and any other information that may support the use of the facility.

Once your application has been approved by the Public Works Director it must be approved by City Council at a City Council Meeting. (note: City Council meetings are held twice a month on the first and third Tuesday of the month.) It is recommended that the applicant attend this meeting to answer any Council questions.

You will receive a copy of your application with your total amount. If you have not received this before your Council meeting please contact the Public Works office.

The above letter must be delivered to:

Engineering and Public Works Department  
1243 National City Blvd.  
National City, CA 91950

If you have any questions, please call the Public Works Department at (619) 336-4580.